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Application No.: 09/900,766 Docket No.: HO-P02188US0

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Goran Forsberg et al.

Application No.: 09/900,766

Confirmation No.: 7699

Filed: July 6, 2001

Art Unit: 1645

For: NOVEL ENGINEERED SUPERANTIGEN FOR

Examiner: P. A. Duffy

**HUMAN THERAPY** 

## **DECLARATION UNDER 37 CFR §1.132**

Dear Sir:

- I, Göran Forsberg, Ph.D., do hereby declare as follows:
- I am a citizen of Sweden, residing at Sturegatan 52, 241 31 Eslöv

  Sweden.
- 2. I am employee of the assignee of the above-referenced patent application ("Application"), I am a coinventor of the Application, and I am familiar with the contents of the Application.
- Currently, I am Head of the Department of Scientific Affairs at Active Biotech AB. I am skilled in the areas of molecular and cell biology, immunology, biochemistry and cancer therapies.
- 4. I am very familiar with the 5T4 antigen and have been responsible for studies (including studies where I have been a co-author) on the expression of 5T4 in normal and malignant tissues.
- 5. The 5T4 antigen is an oncofetal protein normally found on human trophoblasts. 5T4 is also expressed on a variety of different solid tumors. These include Non-small cell lung cancer, Renal cell cancer, Pancreatic cancer, Breast Cancer, Colon cancer, 25571889.1

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Ovarian cancer, Stomach cancer, Cervix cancer as well as Prostate cancer (Table 1). A weak reactivity has occassionaly been found on certain normal tissues as described by Forsberg et al., 2001 (Table 2). In general, this type of normal tissue reactivity is very limited as compared to most known cancer antigens. Examples of staining of cancer tissue and normal tissue are shown in Figure 1.

Table 1, 5T4 reactivity in a variety of tumor types.

Cancer	Stage	Reactivity	Reference	Comments	
NSCLC	Mixed	10/10	Southall 1990	Most or all patients express 5T4 antigen.	
		7/7	Forsberg 2001		
Breast	Mixed	5/5	Southall 1990	Most or all patients express 5T4 antigen	
	i	6/6	Forsberg 2001		
Renal	Clear Cell	1/1	Southall 1990	Most or all clear cell tumors (the most common form	
		20/20	unpublished	of kidney cancer)express 5T4.	
Pancreatic	Mixed	3/3	Southall 1990	More than 95% of tumors express 5T4.	
	1	20/20	unpublished	·	
Ovarian	Mixed	4/7	Southall 1990	More than 70% of ovarian cancers are 5T4 positive.	
	I	2/10	Wrigley 1995	For stage IV patients, 90-95% of the patients are	
	П	4/57	Wrigley 1995	5T4 positive	
	m	21/29	Wrigley 1995	•	
	IV	24/26	Wrigley 1995		
Colorectal	Mixed	4/13	Southall 1990	40-50% of colorectal cancers express 5T4. In Dukes	
	1			stage D patients, more than 70% overexpress the	
	A	2/8	Starszynska 1992	antigen.	
	В	7/34	Starszynska 1992	· .	
	C	13/21	Starszynska 1992		
	D	7/9	Starszynska 1992		
Gastric	Mixed	6/7	Southall 1990	Approximately 50% of gastric cancers have 5T4	
	1	35/86	Starszynska 1998	positive cells. Most samples with 5T4 negative cells	
	I	1/2	Starszynska 1992	have 5T4 positive tumor stroma (Starszynska 1998)	
	TI .	1/4	Starszynska 1992	making more than 95% of the tumors 5T4 positive.	
	Ш	1/1	Starszynska 1992		
	IV	12/20	Starszynska 1992		
Prostate	Mixed	2/2	unpublished		
Cervix	Mixed	5/5	Southall 1990	Between 85 and 90% of patients express 5T4	
	ĮI	22/25	Connor 1990	antigen.	
	n	22/26	Connor 1990	- ,	
	III	9/10	Connor 1990	•	
	IV	5/6	Connor 1990		

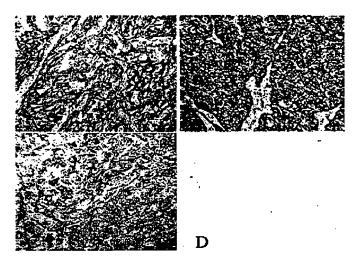
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Table 2 5T4 Normal tissue reactivity

Tissue	Reactivity	Comment
CNS (n=1)	neg.	
Skin (n=2)	neg.	
Myocardium (n=4)	+	Reaction in the luminal outline of a subpopulation of muscular vessels in 2/4 samples.
Adrenal (n=2)	neg.	
Kidney (n=4)	+-++	Diffuse reaction in glomeruli and parietal layer outlining Bowman's capsule (2/4). Weak focal reaction outlining lumen in occasional muscular vessels (2/4).
Lung (n=4)	+•++	Weak luminal outline in occasional vessels (2/4). Moderate reaction in a basal epithelial cellular or matrix component associated with the bronchial epithelium
Liver (n=4)	+	Occasional staining of the sinusoidal outline close to the central vein (1/4).
Pancreas (n=2)	+ = ++	Weak-moderate reaction in occasional pancreatic ducts and scarce stromal structures. Weak focal reaction outlining lumen in occasional muscular vessels.
Gastro-intestinal tract (stomach n=2, small intestine n=2 and large intestine n=4)	L	Reaction in some cell type or extracellular component of the epithelial basal lamina or the lamina propria in parts of the surface epithelium.
Pharynx (n=2)	+-++	Reaction in squamous epithelium (most prominent in basal layer).
Thyroid (n=2)	+	Reaction associated with follicular epithelial cells. Focal reaction outlining lumen of occasional muscular vessels.
Spleen (n=2)	+	Focal reaction outlining lumen of occasional muscular vessels.

Figure 1. 5T4 reactivity on NSCLC (A), renal cell carcinoma (B) and pancreatic cancer (C). The tumors are stained with a streptavidin-peroxidase technique giving a brown reaction product. For comparison a negative control is shown in D.



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6. I hereby declare that all statements made herein on my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Date: Sept 1, 2005

Göran Forsberg, Ph.D